

BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER		5-21-97
EXAMINER	TRACER	8-12-97
TYPIST	DMW	8-26-97
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
Final	
Original	
1-18	1/2/97
19-25	1/2/97
A	1/1
26-34	
35-43	
44-52	
53-61	
62-70	
71-79	
80-88	
89-97	
98-100	

SYMBOLS

<	Rejected
=	Allowed
-	(Through number) Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
1-18	1/2/97
19-51	1/2/97
52	1/1
53	
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